

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)USE FEC MAILING LABEL  
OR TYPE OR PRINT ▼Example: If typing, type  
over the lines

COMMITTEE TO ELECT TIM DAVIS

ADDRESS (number and street)  
▼

P O BOX 10

☐Check if different  
than previously  
reported. (ACC)

BRANSON

MO

65615

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00469320

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

MO

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☒

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

15

2010

through

09

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

EDD AKERS

Signature of Treasurer

Electronically Filed by EDD AKERS

Date

05

03

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

2 / 13

Write or Type Committee Name

COMMITTEE TO ELECT TIM DAVIS

Report Covering the Period:

From:

M M  
0 7D D  
1 5Y Y Y Y  
2 0 1 0

To:

M M  
0 9D D  
3 0Y Y Y Y  
2 0 1 0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	3048.21	18518.96
(b) Total Contribution Refunds (from Line 20(d)).....	660.30	660.30
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	2387.91	17858.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	3139.67	21020.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	3139.67	21020.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2250.85	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	25095.40	

**For further information contact:**

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463  
 Toll Free 800-424-9530  
 Local 202-694-1100

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

COMMITTEE TO ELECT TIM DAVIS

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	1	5	2	0	1	0

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	1	0

## I. RECEIPTS

**COLUMN A**  
 Total This Period

**COLUMN B**  
 Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

2760.30

14997.89

(ii) Unitemized.....

287.91

3521.07

(iii) TOTAL of contributions

3048.21

18518.96

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

3048.21

18518.96

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

## 13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

5600.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

5600.00

## 14. OFFSETS TO OPERATING

EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

0.00

## 15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

## 16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ▶

3048.21

24118.96

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3139.67	21020.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	660.30	660.30
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	660.30	660.30
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	3799.97	21680.66

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3002.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	3048.21
25. SUBTOTAL (add Line 23 and Line 24).....	6050.82
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3799.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2250.85

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 13

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
COMMITTEE TO ELECT TIM DAVIS**A.**Full Name (Last, First, Middle Initial)  
PEGGY DAVIS

Mailing Address 487 SOURWOOD MOUNTAIN DRIVE

City	State	Zip Code
BRANSON	MO	65616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED SCHOOL TEACHEROccupation  
RETIRED SCHOOL TEACHER
 Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

 Election Cycle-to-Date ▼  
 2930.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

Transaction ID: SA11AI.4366

Amount of Each Receipt this Period

930.15

In-kind - ADVANCE COLOR  
PRINT ADVERTISING**B.**Full Name (Last, First, Middle Initial)  
WAYNE DAVIS

Mailing Address 487 SOURWOOD MOUNTAIN DRIVE

City	State	Zip Code
BRANSON	MO	65616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED PROFESSOROccupation  
RETIRED PROFESSOR
 Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

 Election Cycle-to-Date ▼  
 2530.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

Transaction ID: SA11AI.4364

Amount of Each Receipt this Period

930.15

In-kind - ADVANCE COLOR  
PRINT ADVERTISING**C.**Full Name (Last, First, Middle Initial)  
DANIEL WOOTEN

Mailing Address 2333 E ROSEBRIER ST

City	State	Zip Code
SPRINGFIELD	MO	65804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEALE & NEWMAN LLPOccupation  
ATTORNEY
 Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

 Election Cycle-to-Date ▼  
 900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	0

Transaction ID: SA11AI.4362

Amount of Each Receipt this Period

900.00

DONATION

SUBTOTAL of Receipts This Page (optional) .....

2760.30

TOTAL This Period (last page this line number only) .....

2760.30

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 / 13

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
COMMITTEE TO ELECT TIM DAVIS**A.**Full Name (Last, First, Middle Initial)  
CENTURY LINK

Mailing Address P O BOX 4300

City State Zip Code  
CAROL STREAM IL 60197-4300Purpose of Disbursement  
TELEPHONE SERVICE

001

Category/  
TypeCandidate Name  
COMMITTEE TO ELECT TIM DAVISOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 07

Transaction ID: SB17.4383

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	1	0

Amount of Each Disbursement this Period

124.13

**B.**Full Name (Last, First, Middle Initial)  
CENTURY LINK

Mailing Address P O BOX 4300

City State Zip Code  
CAROL STREAM IL 60197-4300Purpose of Disbursement  
TELEPHONE SERVICED

001

Category/  
TypeCandidate Name  
COMMITTEE TO ELECT TIM DAVISOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 07

Transaction ID: SB17.4384

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	0

Amount of Each Disbursement this Period

245.24

**C.**Full Name (Last, First, Middle Initial)  
PEGGY DAVIS

Mailing Address 487 SOURWOOD MOUNTAIN DRIVE

City State Zip Code  
BRANSON MO 65616Purpose of Disbursement  
In-kind - ADVANCE COLOR PRINT ADVERTISING

004

Category/  
TypeCandidate Name  
COMMITTEE TO ELECT TIM DAVISOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MO District: 07

Transaction ID: SB17.4367

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

Amount of Each Disbursement this Period

930.15

SUBTOTAL of Disbursements This Page (optional) .....

1299.52

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 / 13

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
COMMITTEE TO ELECT TIM DAVIS

<b>A.</b> Full Name (Last, First, Middle Initial) WAYNE DAVIS	<b>Transaction ID:</b> SB17.4365 <b>Date of Disbursement</b>																				
Mailing Address 487 SOURWOOD MOUNTAIN DRIVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	9		2	0	1	0												
City BRANSON State MO Zip Code 65616	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement In-kind - ADVANCE COLOR PRINT ADVERTISING	<table border="1"> <tr> <td>930.15</td> </tr> </table>	930.15																			
930.15																					
Candidate Name COMMITTEE TO ELECT TIM DAVIS	<table border="1"> <tr> <td>004</td> </tr> </table> Category/ Type	004																			
004																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) TRI-LAKES ACCOUNTING & TAX SERVICE LLC	<b>Transaction ID:</b> SB17.4377 <b>Date of Disbursement</b>																				
Mailing Address 14974 US HWY 160 SUITE 4	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	7		2	0	1	0												
City FORSYTH State MO Zip Code 65653	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement ACCOUNTING SERVICES	<table border="1"> <tr> <td>260.00</td> </tr> </table>	260.00																			
260.00																					
Candidate Name COMMITTEE TO ELECT TIM DAVIS	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) TRI-LAKES ACCOUNTING & TAX SERVICE LLC	<b>Transaction ID:</b> SB17.4379 <b>Date of Disbursement</b>																				
Mailing Address 14974 US HWY 160 SUITE 4	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	7		2	0	1	0												
City FORSYTH State MO Zip Code 65653	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement ACCOUNTING SERVICES	<table border="1"> <tr> <td>455.00</td> </tr> </table>	455.00																			
455.00																					
Candidate Name COMMITTEE TO ELECT TIM DAVIS	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional) .....

1645.15

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 / 13

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
COMMITTEE TO ELECT TIM DAVIS
**A.** Full Name (Last, First, Middle Initial)  
TRI-LAKES ACCOUNTING & TAX SERVICE LLCMailing Address 14974 US HWY 160  
SUITE 4

City FORSYTH State MO Zip Code 65653

Purpose of Disbursement  
ACCOUNTING SERVICESCandidate Name  
COMMITTEE TO ELECT TIM DAVISOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 07

Transaction ID: SB17.4380

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	0

Amount of Each Disbursement this Period

97.50

**B.** Full Name (Last, First, Middle Initial)  
TRI-LAKES ACCOUNTING & TAX SERVICE LLCMailing Address 14974 US HWY 160  
SUITE 4

City FORSYTH State MO Zip Code 65653

Purpose of Disbursement  
ACCOUNTING SERVICECandidate Name  
COMMITTEE TO ELECT TIM DAVISOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 07

Transaction ID: SB17.4387

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	0

Amount of Each Disbursement this Period

97.50

SUBTOTAL of Disbursements This Page (optional) .....

195.00

TOTAL This Period (last page this line number only) .....

3139.67

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
COMMITTEE TO ELECT TIM DAVIS
**A.**

Full Name (Last, First, Middle Initial)

PEGGY DAVIS

Mailing Address 487 SOURWOOD MOUNTAIN DRIVE

City BRANSON State MO Zip Code 65616

Purpose of Disbursement  
REIMBURSEMENT FOR IN KIND CONTRIBUTION ADVERTISING

Candidate Name  
COMMITTEE TO ELECT TIM DAVIS

004  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 07

Transaction ID: SB20A.4381

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

Amount of Each Disbursement this Period

530.15

**B.**

Full Name (Last, First, Middle Initial)

WAYNE DAVIS

Mailing Address 487 SOURWOOD MOUNTAIN DRIVE

City BRANSON State MO Zip Code 65616

Purpose of Disbursement  
REIMBURSEMENT OF IN KIND CONTRIBUTION ADVERTISING

Candidate Name  
COMMITTEE TO ELECT TIM DAVIS

004  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 07

Transaction ID: SB20A.4382

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	0

Amount of Each Disbursement this Period

130.15

SUBTOTAL of Disbursements This Page (optional) .....

660.30

TOTAL This Period (last page this line number only) .....

660.30

**SCHEDULE C (FEC Form 3)**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 10 / 13

**LOANS**FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT TIM DAVIS

Transaction ID: SC/10.4101

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
TIMOTHY SEAN DAVIS - [PERSONAL FUNDS]

Election:

☐ Primary  
☒ General  
☐ Other (specify) ▼

Mailing Address P O BOX 1625

City BRANSON

State MO

ZIP Code 65615

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 1D D  
0 5Y Y Y Y  
2 0 0 9

11/30/2010

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

100.00

**TOTALS** This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 11 / 13

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT TIM DAVIS

Transaction ID: SC/10.4154

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
TIMOTHY DAVIS - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address P O BOX 1625

City BRANSON

State MO

ZIP Code 65615

Original Amount of Loan

3500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3500.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 2D D  
2 8Y Y Y Y  
2 0 0 9

11/30/2010

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

3500.00

**TOTALS** This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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**LOANS**FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT TIM DAVIS

Transaction ID: SC/10.4169

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
TIMOTHY SEAN DAVIS - [PERSONAL FUNDS]

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address P O BOX 1625

City BRANSON

State MO

ZIP Code 65615

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 3D D  
1 1Y Y Y Y  
2 0 1 0

11/30/2010

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

2000.00

**TOTALS** This Period (last page in this line only) ▶

5600.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
COMMITTEE TO ELECT TIM DAVIS**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
IMAGEMAKERSNature of Debt (Purpose):  
WEBSITE PRODUCTION AND HO-  
STING

Mailing Address P O BOX 5050

City State ZIP Code  
BRANSON MO 65615

Outstanding Balance Beginning This Period

595.00

Transaction ID: SD10.4436

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

595.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
IMAGEMAKERSNature of Debt (Purpose):  
WEBSITE DEVELOPMENT, DESI-  
GN WORK, PHOTOGRAPHY, AND  
PRINTING

Mailing Address P O BOX 5050

City State ZIP Code  
BRANSON MO 65615

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.4385

Amount Incurred This Period

18900.40

Payment This Period

0.00

Outstanding Balance at Close of This Period

18900.40

1) **SUBTOTALS** This Period This Page (optional).....

19495.40

2) **TOTALS** This Period (last page this line number only).....

19495.40

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

5600.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

25095.40